As a belownamed inventor, I hereby declare that: my residence, post office address and citizenship are as stated belowundermy name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: Fuel cell comprising a magnetic cathode with static pumping.

described and claimed in international application number PCT/FR2003/003558 filed on December 02,200

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as

defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code § 119, the priority benefits of the following foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

National French Patent Application No . 02 15253/ Filed on December 04, 2002

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above named foreign prior ty application(s):

NONE

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NO. 25944, TELEPHONE (703)836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1-1	Typewritten Full Name of Sole or First Inventor			Didier		-MARSACQ		
				Given Name	Middle Initial	Family Name		
2	Inventor's Signature:					2005		
3	Date of Signature:		1	May	20	2005		
	Residence: Grer		noble	Month	Day .	Year France		
	Citizenship:	FRENCH	City		State or Province	Country		
	•	t Office Address	:	12 rue Jean Prévost				
	(Insert complete mailing address, including country) F-38000 GRENOBLE, FRANCE (FR)							

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

Rec'd PCT/PTO 02 JUN 2005

1 $1\mathbf{y}\mathbf{p}$	ewritten rutt Num	e _			• •
of J	oint Inventor	9-15	_Christine		-NAYOZE
	entor's Signature:	, , ,	Given Name	Middle Initial	Family Name
	te of Signature:		May	20	2005
			Month	Day	Year
	Residence:		Fontaine TRX		France
			City	State or Province	Country
	Citizenship:	FRENCH			
	Post O	office Address:	oliot Curie		
		t complete mai ss, including c		TAINE, FRANCE (F	R)
1 <i>Typ</i>	ewritten Full Nam	e			
of J	oint Inventor	?-0D -	<u>Christel</u>		ROUX
			Given-Name	Middle Initial	Family Name
2 Inv	entor's Signature:				
3 Dat	te of Signature:		May	20	2005
J	Residence:	Saint-Q	uentin-Sur-Isère	FRX Day	France
	Residence.		City	State or Province	Country
	Citizenship:	FRENCH ~			•
	•		La Terrass	6	
		ffice Address:			
•		complete mai		NT-QUENTIN-SUR-I	SERE, FRANCE (FR
	addres	s, including c	ountry) F-36210 3A1	MI-QUENTIN BUN I	DEREY TRIMED (TR
1 Typ	ewritten Full Nam	e _			
4	oint Inventor	4-00	Alejandro		_ERANCO_
-, -		102	Given Name	Middle Initial	Family Name
2 Inv	entor's Signature:		075		
	_		100		2005
3 Da	te of Signature:		May	20	2005
			Month - OV	Day	Year
	Residence:		chirolles FRX		France
		* :	City	State or Province	Country
	Citizenship:	ARGENTIN	Α .		
		ffice Address:		u 08 mai 1945, P	orte 28
	(complete mai s, including co		IROLLES, FRANCE	(FR)
1 Typ	ewritten Full Name	e			
of J	oint Inventor	_	<u> </u>		
•		_	Given Name	Middle Initial	Family Name
2 Inv	entor's Signature:	_			
3 Dat	te of Signature:				
5 Da	teor Signature.	_	Month	Day	Year
	Residence:			,	Country
	Residence.		City	State or Province	
	Ciaire al les		·		
	Citizenship:				
	Post O	ffice Address:			
		complete mai			
	addres	s, including co	ountry)		

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.